MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project

Advisory Groups and Interested Parties

FROM: John Pandiani

Bill Bagdon

DATE: August 21, 1998

RE: Practice Patterns: Medication

Over the coming weeks, we will continue to distribute data on patterns of service delivery at hospital and community mental health programs in Vermont. This week's report provides a broad overview of the rates at which Children's Services, Adult Outpatient, and CRT programs in Vermont use psychotropic medication in the treatment of their clients. The measure used here is based on medication monitoring services reported by community programs in their Quarterly Service Reports.

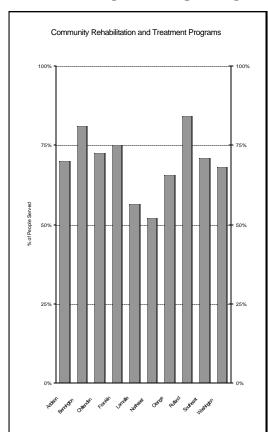
As you will see, there is a great deal of variation among the three treatment programs, and some substantial variation among programs at individual CMHCs. Clients of CRT programs are the most likely to receive medication (69%) followed by Adult Outpatient Programs (34%) and Children's Services programs (10%). Medication rates at individual CRT programs varied from 52% to 84%. Medication rates at individual Adult Outpatient programs varied from 17% to 43%. Medication rates at individual Children's Services programs varied from 4% to 16%.

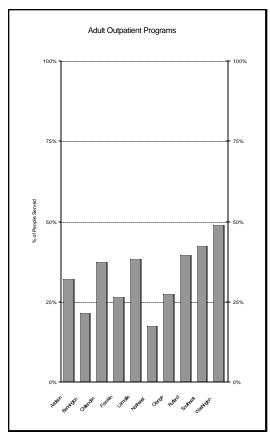
Statistically, medication rates vary among CRT treatment programs but have not changed over time. Medication rates also vary among Adult Outpatient, and there has been a statistically significant increase in the proportion of Adult Outpatient clients whose treatment includes medication. Finally, there was not a significant difference among Children's Services Programs in the proportion of consumers who received medication, but there was a statistically significant increase in the proportion of children and adolescents whose treatment included medication.

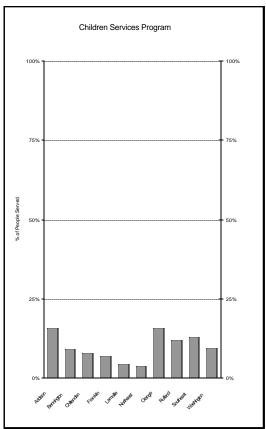
The attached tables provide a broad overview of medication utilization patterns. In the future, we will be sharing information on medication utilization that relates to specific concerns in the MHSIP guidelines for performance measurement. These guidelines include a focus on the use of medication in the treatment of major depression, and the use of atypical medications in the treatment of schizophrenia. We would also be interested if there is any particular Vermont interest in patterns of medication utilization.

If you have any questions, please send e-mail to pip@ddmhs.state.vt.us or give me a call (802-241-2638).

CLIENTS RECEIVING CHEMOTHERAPY SERVICES: FY 1997





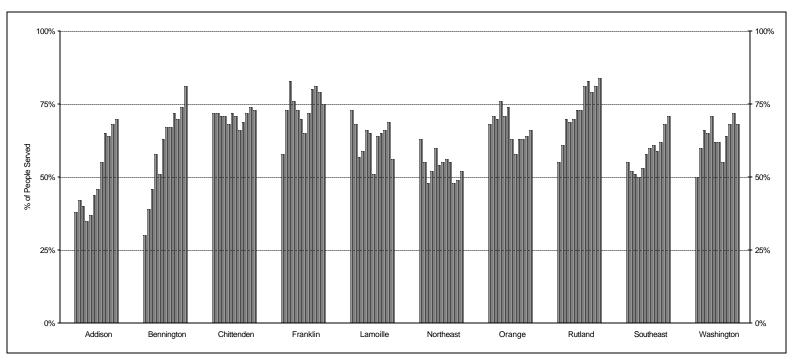


Region	Clients	Receiving	Percent		
		Services			
Addison	186	130	70%		
Bennington	213	173	81%		
Chittenden	702	510	73%		
Franklin	297	223	75%		
Lamoille	147	83	56%		
Northeast	553	288	52%		
Orange	154	101	66%		
Rutland	362	305	84%		
Southeast	590	418	71%		
Washington	900	612	68%		
Statewide	4,104	2,843	69%		

Region	Clients	Receiving	Percent	
		Services		
Addison	648	208	32%	
Bennington	721	156	22%	
Chittenden	875	326	37%	
Franklin	857	227	26%	
Lamoille	324	124	38%	
Northeast	714	124	17%	
Orange	296	81	27%	
Rutland	608	240	39%	
Southeast	1,700	720	42%	
Washington	633	310	43%	
		·		
Statewide	7,376	2,516	34%	

Region	Clients	Receiving	Percent
		Services	
Addison	759	120	16%
Bennington	477	44	9%
Chittenden	1,118	87	8%
Franklin	542	37	7%
Lamoille	421	18	4%
Northeast	891	33	4%
Orange	559	89	16%
Rutland	734	88	12%
Southeast	1,558	200	13%
Washington	523	50	10%
Statewide	7,806	766	10%

CLIENTS RECEIVING CHEMOTHERAPY SERVICES COMMUNITY REHABILITATION AND TREATMENT PROGRAMS: FY1986 - FY1997

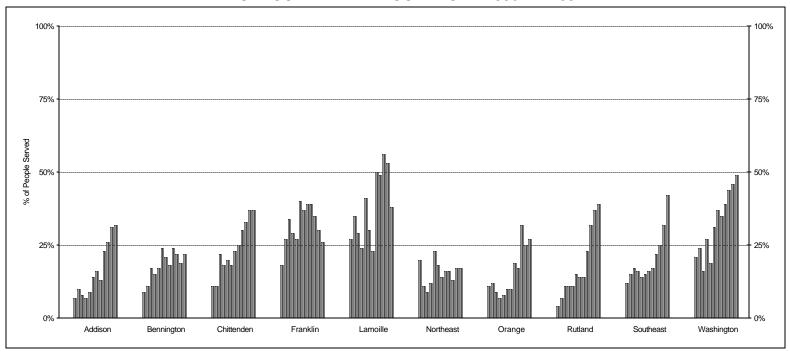


	Statewide	Addison	Bennington	Chittenden	Franklin	Lamoille	Northeast	Orange	Rutland	Southeast	Washington
FY1997	69%	70%	81%	73%	75%	56%	52%	66%	84%	71%	68%
FY1996	69%	68%	74%	74%	79%	69%	49%	64%	81%	68%	72%
FY1995	66%	64%	70%	72%	81%	66%	48%	63%	79%	62%	68%
FY1994	66%	65%	72%	69%	80%	65%	55%	63%	83%	59%	64%
FY1993	63%	55%	67%	66%	72%	64%	56%	58%	81%	61%	55%
FY1992	62%	46%	67%	71%	65%	51%	55%	63%	73%	60%	62%
FY1991	63%	44%	63%	72%	70%	65%	54%	74%	73%	58%	62%
FY1990	63%	37%	51%	68%	73%	66%	60%	71%	70%	53%	71%
FY1989	61%	35%	58%	71%	76%	59%	52%	76%	69%	50%	65%
FY1988	61%	40%	46%	71%	83%	57%	48%	70%	70%	51%	66%
FY1987	60%	42%	39%	72%	73%	68%	55%	71%	61%	52%	60%
FY1986	56%	38%	30%	72%	58%	73%	63%	68%	55%	55%	50%

Includes chemotherapy services provided by CMHC's. Chemotherapy includes both the prescription by a physician or qualified nurse of psychoactive drugs to favorably influence or prevent mental illness and the monitoring and assessment of patient

DDMHS,R&S,wmb, 02/05/2001

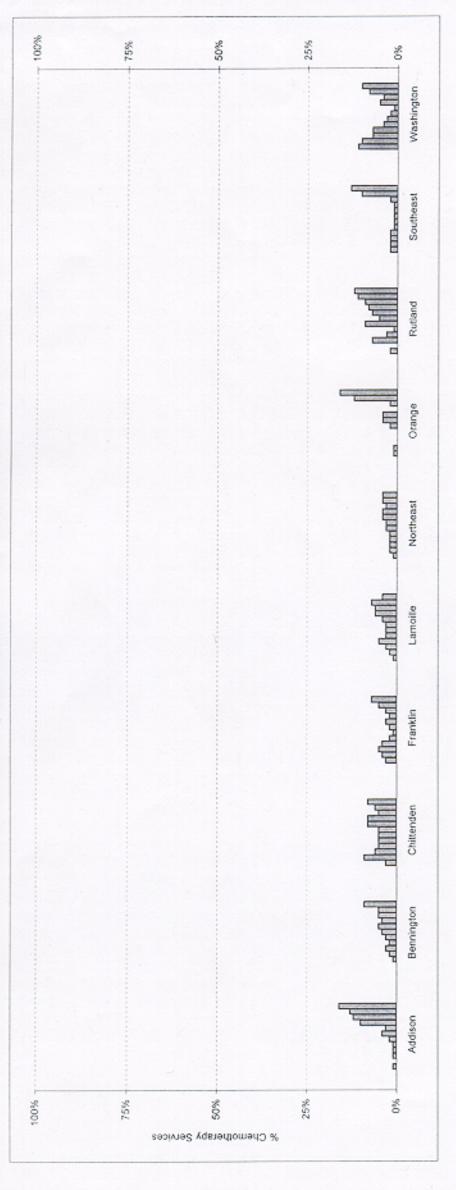
CLIENTS RECEIVING CHEMOTHERAPY SERVICES ADULT OUTPATIENT PROGRAMS: FY1986 - FY1997



	Statewide	Addison	Bennington	Chittenden	Franklin	Lamoille	Northeast	Orange	Rutland	Southeast	Washington
FY1997	34%	32%	22%	37%	26%	38%	17%	27%	39%	42%	49%
FY1996	32%	31%	19%	37%	30%	53%	17%	25%	37%	32%	46%
FY1995	29%	26%	22%	33%	35%	56%	13%	32%	32%	25%	44%
FY1994	27%	23%	24%	30%	39%	49%	16%	17%	23%	22%	39%
FY1993	23%	13%	18%	25%	39%	50%	16%	19%	14%	17%	35%
FY1992	21%	16%	21%	23%	37%	23%	14%	10%	14%	16%	37%
FY1991	21%	14%	24%	18%	40%	30%	18%	10%	15%	15%	31%
FY1990	18%	9%	17%	20%	27%	41%	23%	8%	11%	14%	19%
FY1989	17%	7%	15%	18%	29%	24%	12%	7%	11%	16%	27%
FY1988	17%	8%	17%	22%	34%	29%	9%	9%	11%	17%	16%
FY1987	15%	10%	11%	11%	27%	35%	11%	12%	7%	15%	24%
FY1986	13%	7%	9%	11%	18%	27%	20%	11%	4%	12%	21%

Includes chemotherapy services provided by CMHC's. Chemotherapy includes both the prescription by a physician or qualified nurse of psychoactive drugs to favorably influence or prevent mental illness and the monitoring and assessment of patient

CLIENTS RECEIVING CHEMOTHERAPY SERVICES CHILDREN'S SERVICES PROGRAMS: FY1986 - FY1997



Includes chemotherapy services provided by CAPICs. Chemotherapy includes both the prescription by a physician or qualified nurse of psychoactive drugs to favorably influence and the monitoring and assessment of patient reaction to prescribed drugs. Chemotherapy services tend to average less than 30 minutes in duration.